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APPLICANTS

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** CONTINUING DATA *****

*none -
cuh*

** FOREIGN APPLICATIONS *****

*none -
cuh*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IL	SHEETS DRAWING 6	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Cheryl M. Hawkin</i> Examiner's Signature	<i>cul</i> Initials		

ADDRESS

04743

MARSHALL, GERSTEIN & BORUN LLP

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TITLE

Tape dispenser with a cushioned applicator tip

FILING FEE RECEIVED 1164	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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